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PTO/SB/05 (03-01)  
Approved for use through 10/31/2002. OMB 0651-0032

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>226272003901</b>
		First Inventor <b>Carmel M. LYNCH</b>
		Title <b>AMPLIFIABLE ADENO-ASSOCIATED VIRUS (AAV) PACKAGING CASSETTES FOR THE PRODUCTION OF RECOMBINANT AAV VECTORS</b>
		Express Mail Label No. <b>EV333854495US</b>

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> Box Patent Application Commissioner for Patents Washington, DC 20231	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) - 2 pages <small>(Submit an original, and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or <small>Computer Program (Appendix)</small>	
2. <input checked="" type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>		8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>	
3. <input checked="" type="checkbox"/> Specification      [Total Pages <b>52</b> ] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed Sponsored R &amp; D</li> <li>- Reference to sequence listing, e table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or     ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113)      [Total Sheets <b>5</b> ]		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
5. Oath or Declaration      [Total Pages <b>2</b> ]		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee)</small> <input type="checkbox"/> Attorney	
a. <input type="checkbox"/> Newly executed (original or copy)		11. <input type="checkbox"/> English Translation Document (if applicable)	
b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small>		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>		13. <input type="checkbox"/> Preliminary Amendment	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 - 3 pages		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>	
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). <small>Applicant must attach form PTO/SB/35 or its equivalent.</small>	
		17. <input type="checkbox"/> Other: _____	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76.

Continuation     Divisional     Continuation-in-part (CIP)    of prior application No. **09/180,114**

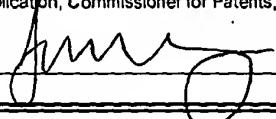
\*Prior application information: Examiner **D. Guzo** Group / Art Unit: **1636**  
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		or <input type="checkbox"/> Correspondence address below
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Name		
Address		
City	State	Zip Code
Country	Telephone	Fax

Name (Print/Type)	<b>Catherine M. Polizzi</b>	Registration No. (Attorney/Agent)	<b>40,130</b>
Signature			
Date	<b>July 7, 2003</b>		

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV333854495US, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date shown below.

Dated: **7/7/03** Signature:  (Tamara Alcaraz)

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<b>FEE TRANSMITTAL for FY 2003</b>		<i>Complete if Known</i>																																																																																																																																																																																																																																	
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ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th colspan="2"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td colspan="2">Surcharge – late filing fee or oath</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td colspan="2">Surcharge – late provisional filing fee or cover sheet.</td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td colspan="2">Non-English specification</td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td colspan="2">For filing a request for ex parte reexamination</td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td colspan="2">Requesting publication of SIR prior to Examiner action</td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td colspan="2">Requesting publication of SIR after Examiner action</td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td colspan="2">Extension for reply within first month</td> </tr> <tr> <td>1252</td> <td>410</td> <td>2252</td> <td>205</td> <td colspan="2">Extension for reply within second month</td> </tr> <tr> <td>1253</td> <td>930</td> <td>2253</td> <td>465</td> <td colspan="2">Extension for reply within third month</td> </tr> <tr> <td>1254</td> <td>1,450</td> <td>2254</td> <td>725</td> <td colspan="2">Extension for reply within fourth month</td> </tr> <tr> <td>1255</td> <td>1,970</td> <td>2255</td> <td>985</td> <td colspan="2">Extension for reply within fifth month</td> </tr> <tr> <td>1401</td> <td>320</td> <td>2401</td> <td>160</td> <td colspan="2">Notice of Appeal</td> </tr> <tr> <td>1402</td> <td>320</td> <td>2402</td> <td>160</td> <td colspan="2">Filing a brief in support of an appeal</td> </tr> <tr> <td>1403</td> <td>280</td> <td>2403</td> <td>140</td> <td colspan="2">Request for oral hearing</td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510</td> <td colspan="2">Petition to institute a public use proceeding</td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td colspan="2">Petition to revive – unavoidable</td> </tr> <tr> <td>1453</td> <td>1,300</td> <td>2453</td> <td>650</td> <td colspan="2">Petition to revive - unintentional</td> </tr> <tr> <td>1501</td> <td>1,300</td> <td>2501</td> <td>650</td> <td colspan="2">Utility issue fee (or reissue)</td> </tr> <tr> <td>1502</td> <td>470</td> <td>2502</td> <td>235</td> <td colspan="2">Design issue fee</td> </tr> <tr> <td>Total Claims</td> <td>25</td> <td>Extra Fee from Claims below</td> <td>9.00</td> <td>Fee Paid</td> <td>45.00</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>3** =</td> <td>0</td> <td>x</td> <td>42.00 = 0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td>140</td> <td>=</td> <td>0.00</td> </tr> <tr> <td colspan="2"><b>SUBTOTAL (1) (\$)</b></td> <td colspan="2"><b>375.00</b></td> <td colspan="2"></td> </tr> <tr> <td colspan="2"><b>2. 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\*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY					
Name (Print/Type)		Registration No. (Attorney/Agent)		Complete (if applicable)	
Name (Print/Type)	Catherine M. Polizzi	Registration No. (Attorney/Agent)	40,130	Telephone	(650) 813-5651
Signature	<i>Catherine M. Polizzi</i>		Date	July 7, 2003	